MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/567,683

FILING DATE 2-9-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							51						
2	1							52						
3		1						53						
4		1						54						
5		2						55						
6		2						56						
7		2						57						
8		2						58						
9		2						59						
10		2						60						
11								61						
12								62						
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41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	2							TOTAL IND.						
TOTAL DEP.	14							TOTAL DEP.						
TOTAL CLAIMS	16							TOTAL CLAIMS						